PATENT APPLICATION FEE DETERMINATION RECO									Application or Docket Number					
	PATENI		ON FEE Date			ION RECO	ORE		10/	70	5020	38		
	a second			ENTITY			R THAN							
TOTAL CLAIMS						umn 2)	1	RATE		`OR T		ENTITY		
FOR :			NUMBER FILED NU			BER EXTRA		BASIC F	- I SOF	140	BASIC FEE	17570		
TOTAL CHARGEABLE CLAIMS			20 minus 20= *					 	-	1				
INDEPENDENT CLAIMS				ninus 3 =	*		_	X\$ 9=		OR				
MULTIPLE DEPENDENT CLAIM P								146	-	OR				
								+135		OR	190 +270=			
* If the difference in column 1 is less than zero, enter "0" in colu						column 2	• •	TOTAL		OR	TOTAL	770		
٠.	CLAIMS AS AMENDED - PART II							OBA A 1		.	OTHER			
-4		(Column 1) CLAIMS		(Colun	ESŢ	(Column 3)	l · [SMAL	L ENTITY ADDI-	ОН. Т	SMALL	· ·		
AMENDMENT /		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE		
QN	Total	13	Minus 20	** -		= .		· X\$ 9=		OR	X\$18=			
AME	Independent	<u> </u>	Minus 3	***			-	X40=		OR	36			
	FIRST PRESE	ENTATION OF MU	JLTIPLE DE	PENDENT	CLAIM			+135=	 	1	290			
				· · · · · ·	•		L	TOTA		OR	TOTAL	HA A		
		(Column 1)		· · (Colum	nn 2)	(Column 3)	. ,	ADDIT. FE	E L _	OR	ADDIT. FEE	440		
MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	SER USLY	PRESENT EXTRA		RATE	ADDI TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDM	Total	. 35	Minus 20	**		- 15		X\$ 9=	'	OR	X\$16=	770		
	Independent		Minus 3	***.		= 12	┟	X40=	 	1 1	38	270		
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT	CLAIM		ŀ		 	OR	290	1032		
							L	+135=		OR	1270=			
							Α	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT, FEE	2072		
\neg	CONTRACTOR OF THE PERSON OF TH	(Column 1)	THE REPORT OF	(Colum		(Column 3)								
AMENDMENT C		REMAINING AFTER		NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ĺ	RATE	ADDI- TIONAL FEE		
	Total	. 36	Minus 35	**		=		X\$ 9=	1	OR	X\$18=	770		
AME.	Independent		Minus 5	***		= 2	-	X40=			86	18		
l	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		\vdash	X40=		OR	701	172		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+870_0			
	f the "Highest Nun If the "Highest Nur	mber Previously Paid mber Previously Paid ber Previously Paid	d For" IN THIS d For" IN THIS	SPACE is I SPACE is	less than less than	20, enter "20."		TOTAL ODIT. FEE			TOTAL DDIT. FEE	460		